

EXHIBIT 3  
 DATE 2/18/09  
 MB 517

## THINGS TO TRY:

- WITHIN THE FIRST 24 - 48 HOURS periods of appropriate physical exercise, alternated with relaxation will alleviate some of the physical reactions.
- Structure your time; keep busy.
- You're normal and having normal reactions; don't label yourself crazy.
- Talk to people; talk is the most healing medicine.
- Be aware of *numbing* the pain with overuse of drugs or alcohol, you don't need to complicate this with a substance abuse problem.
- Reach out; people do care.
- Maintain as normal a schedule as possible.
- Spend time with others.
- Help your co-workers as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feelings with others.
- Keep a journal; write your way through those sleepless hours.
- Do things that feel good to you.
- Realize those around you are under stress.
- Don't make any big life changes.
- Do make as many daily decisions as possible that will give you a feeling of control over your life, i.e., if someone asks you what you want to eat, answer him even if you're not sure.
- Get plenty of rest.
- Don't try to fight reoccurring thoughts, dreams or flashbacks - they are normal and will decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

## FOR FAMILY MEMBERS & FRIENDS

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if (s)he has not asked for help.
- Reassure him that he is safe.
- Help him with everyday tasks like cleaning, cooking, caring for the family, minding children.
- Give him some private time.
- Don't take his anger or other feelings personally.
- Don't tell him that he is "lucky it wasn't worse;" a traumatized person is not consoled by those statements. Instead, tell him that you are sorry such an event has occurred and you want to understand and assist him.

## ***A Brief Review of Why CISM Helps***

- 1) EARLY INTERVENTION:** CISM is typically utilized as an early intervention strategy before traumatic memories may be cemented in the mind and perhaps distorted or over-generalized.
- 2) OPPORTUNITY FOR CATHARSIS:** CISM provides a safe, supportive, structure environment for venting emotions.
- 3) OPPORTUNITY TO VERBALIZE TRAUMA:** CISM provides the opportunity to verbally reconstruct and express specific traumas, fears, and regrets.
- 4) STRUCTURE:** CISM provides a structure setting to discuss a chaotic event.
- 5) GROUP SUPPORT:** CISM group interventions are based on a group education model. Group format provides numerous healing factors such as exchange of constructive information, dissolving the myth of unique weakness among individuals, modeling constructive coping behaviors, deriving a sense of group caring and support, providing the opportunity to help oneself by helping others, and perhaps most importantly with regard to trauma, the generation of feelings of hope.
- 6) PEER SUPPORT:** Although mental health professionals oversee the process, CISM is peer-driven, which offers unique advantages over traditional mental health services, especially when the group views itself as being highly specialized or otherwise different from the general population.
- 7) OPPORTUNITY FOR FOLLOW-UP:** The CISM process provides an array of interventions and acts as an entry portal where people can engage in group discussions, information exchanged, and support. It also provides the mechanism for identifying people who need additional assistance to recover.

## EXAMPLE 7 STAGE CRITICAL INCIDENT STRESS INTERVENTION

Stage	Objective	Sample Prompts by Intervention Team Members
1. Introduction	To introduce intervention team members, explain process, set expectations	<p>"This is not an operations critique."</p> <p>"The purpose here is to lessen the impact of what has happened."</p> <p>"There can be no note-taking or recording of comments."</p> <p>"The team members will be around after this get together if you have further questions"</p>
2. Fact	To describe traumatic event from each person's perspective on a cognitive level	<p>"It would help if you could give a brief overview of what happened"</p> <p>"We don't need elaborate details."</p> <p>"Give us a few lines that tells us who you are, what your role was, and a thumbnail of the situation will be enough"</p>
3. Thought	To allow participants to describe cognitive reactions and to transition to emotional reactions	<p>"What was your first or main thought during this event?"</p> <p>"What was your first thought when you realized you were actually thinking and not just functioning on an automatic mode?"</p> <p>"What was the worse thing about this incident for you?"</p>
4. Reaction	To identify the most traumatic aspect of the event for the participants and identify emotional reactions	<p>or</p> <p>"If you could erase one part of this event, without changing the outcome, what would it be?"</p>
5. Signals	To identify personal signals of distress and transition back to cognitive level	<p>"After a thing like this, people can experience a wide range of things like trouble sleeping or loss of appetite."</p> <p>"What signals did you pick up in yourself either while this thing was going on or in the time that has passed since it ended?"</p>
6. Teaching	To educate as to normal reactions and adaptive coping mechanisms and stress management. Provide cognitive anchor.	<p>"Now that we have heard what happened, how you thought about it, the worst part and the signals of distress you have experienced, we will give you some information which we believe will help to put things in perspective and help you recover and return to your normal duties and your home life."</p> <p><b>** Handout</b></p>
7. Re-entry	To clarify ambiguities, prepare for termination, facilitate psychological closure	<p>"So, to wrap up I'll summarize today's discussion."</p> <p>"Remember, it is normal to have reactions to an abnormal event."</p> <p>"Just to reiterate, what has been shared here is strictly confidential. You can talk to whomever you want about your own experience of this event, but do not talk about what someone else here has said."</p>